

PATENT APPLICATION SERIAL NO. \_\_\_\_\_

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE  
FEE RECORD SHEET

02/21/2002 HMEKONEN 00000052 10075221

01 FC:201 370.00 OP

~~02/21/2002 HMEKONEN 00000053 50267728~~

~~01 FC:227 25.00 OP~~

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>4/12/04</u>		2 Serial/Patent # <u>10/075,221</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT						
	Filing			\$						
	Amendment			\$						
	Extension of Time	9	6/22/04	\$ 190 ✓						
	Notice of Appeal/Appeal			\$						
	Petition			\$						
	Issue			\$						
	Cert of Correction/Terminal Disc.			\$						
	Maintenance			\$						
	Assignment			\$						
	Other			\$						
		7 TOTAL AMOUNT OF REFUND		\$ 190 ✓						
10 REASON:		8 TO BE REFUNDED BY:								
Overpayment		Treasury Check								
Duplicate Payment		Credit Deposit A/C #:								
No Fee Due (Explanation):		9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">--</td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					--			
		--								
11 REFUND REQUESTED BY: <u>LC TAYLOR</u>										
TYPED/PRINTED NAME: <u>Det.</u>		TITLE: <u>Att</u>								
SIGNATURE: <u>[Signature]</u>		PHONE: <u>703 308 2263</u>								
OFFICE: <u>[Signature]</u>										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED: <u>[Signature]</u>		DATE: <u>7-14-04</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B